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1.	NAME OF COMMITTEE (in fu		OR PRINT ▼	Example: over the	If typing, type lines.	12FE4	lM5		
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2.	FEC IDENTIFICAT	TION NUMBER	▼ C	ITY 🛦		STATE A		ZIP CODE A	
	C0042	6.12.2	3.	IS THIS REPORT	NEW (N) C	OR 🔲	AMENDED (A)		
4.	July 15 Quarterly October—1 Quarterly January 3	rts: Report (Q1) Report (Q2) Report (Q3) Report (YE) dd-Year con-election (MY)	Report Due On: M. Ap 12-Day PRE-Election Report for the: Elect 30-Day POST-Election Report for the:	Conv.	May 20 (Jun 20 (N Jul 20 (N ary (12P) ention (12C) ral (30G)	M6) Gen	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) eral (12G) cial (12S) off (30R)	In the State of	20 (M11) Election Only) 20 (M12) Election Only) 31 (YE) off (12R)
5.	Covering Period	3 (20.	1 G the	rough	3 3	1 20	7.6	
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.